U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 1/380	2. Fiscal Year Covered From:
Friffi Formattina (Francis	1 / 1 / 2004 Through: 12 / 31 / 2004
. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Tim Loftus	Name Iron Workers Local 63 Union
	Labor Organization File Number 022-678
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 2525 W. Lexington	Street 2525 W. Lexington
City Broadview	City Broadview
State Illinois 3.4.2.2.4.4.4.4.2.2.2.2.2.2.2.2.2.2.2.2.	State Illinois ZIP Code + 4 60153
Position in labor organization. Executive Board Member	
	se or minor child directly or indirectly had any of the following interests
. Held an interest in, engaged in transactions (including loans) with, or o	sions set forth in the instructions): derived income or other economic benefit of
. Held an interest in, engaged in transactions (including loans) with, or o conetary value from an employer whose employees your organizatio	sions set forth in the instructions): derived income or other economic benefit of
Held an interest in, engaged in transactions (including loans) with, or conetary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any). Itame Trade Name, if any:	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.
. Held an interest in, engaged in transactions (including loans) with, or concetary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any). Name Frade Name, if any:	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.
. Held an interest in, engaged in transactions (including loans) with, or concretary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any).	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
Held an interest in, engaged in transactions (including loans) with, or concetary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street ZIP Code + 4	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.
Held an interest in, engaged in transactions (including loans) with, or concetary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg Room No., if any Street ZIP Code + 4	Iderived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount.
. Held an interest in, engaged in transactions (including loans) with, or concetary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg Room No if any Street ZIP Code + 4 Signature and verification. The undersigned declares, under penalty of F submitted in this report (including the information contained in any accompany)	Iderived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount.

Name of Person Filing Tim Loftus	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to, or otherwise	
8. Name and address of Business (including trade name, if any). Name AMTS for Local 63 Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 2525 W. Lexington Street City Broadview State Illinois ZIP Code +4 60153	9. Business deals with: a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	The Architectural Metal Trainee Sch educational trust fund created by L	
Street	11.b. Approximate dollar value of such dealing.	\$0
State ZIP Code + 4	12.a. Nature of interest held or income received. Attended the annual Christmas party \$38.	- cost of meal
	12.b. Amount.	\$38
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:	14.a. Nature of payment,	
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	

	File Number U-
Name of Person Filing Tim Loctus	

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Gregorio & Associates Trade Name, If any: P.O. Box Bidg, Room No. If any Street Two North LaSalle Street City Chicago State Illinois ZIP Code + 4 60602	a. Labor Organization
10. If 9 b. or 8.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Trade Name, if any: P.O. Box, Blog. Room No., If any Street: City State ZIP Code + 4	Provides legal services. 11.b. Approximate dollar value of such cealing. \$48,000 12.a. Nature of interest held or income received. Received steaks at Christmas.
	12.b. Amount. \$150